

OFFICE OF LEGISLATIVE RESEARCH
PUBLIC ACT SUMMARY



PA 14-176—sHB 5521

Education Committee

Appropriations Committee

**AN ACT CONCERNING THE STORAGE AND ADMINISTRATION OF
EPINEPHRINE AT PUBLIC SCHOOLS**

SUMMARY: This act requires schools to designate and train nonmedical staff to administer emergency epinephrine in cartridge injectors (“epipens”) to students having allergic reactions who were not previously known to have serious allergies. It authorizes the emergency use of epipens by nonmedical staff only if (1) the school nurse is not present or available and (2) certain conditions are met.

The act permits the following individuals (i.e., “qualified school employees”) to be trained and authorized: principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach of school intramural or interscholastic athletics, and school paraprofessional. By law, (1) all of these individuals can, under specific circumstances, administer glucagon via injection to a student with diabetes and (2) a specifically designated paraprofessional can administer an epipen to a student with a known allergy.

The act requires the school nurse or school principal to select qualified school employees to be trained to administer epipens under the act’s provisions. The professionals must meet training and other requirements before being allowed to administer epipens. Schools must (1) have at least one qualified professional on the school grounds during regular school hours and (2) maintain a store of epipens for emergency use.

The act also:

1. extends the immunity from liability for employees and local boards provided under the existing prior-authorization glycogen and epipen laws to the epinephrine provisions,
2. requires the departments of Education (SDE) and Public Health (DPH) to jointly develop an annual training program for emergency epipen administration, and
3. requires SDE to adopt regulations necessary to carry out the new epipen administration and storage procedures.

EFFECTIVE DATE: July 1, 2014

STUDENTS WITH ALLERGIES

Administering Emergency Epinephrine

The act requires a school nurse or principal to select qualified school professionals to, under certain conditions and without a prior written authorization from a parent or guardian or a written order from a qualified medical professional

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for the administration of epinephrine, give an emergency epipen injection to a student having an allergic reaction. It defines “qualified medical professional” as a Connecticut-licensed physician, optometrist, advanced practice registered nurse, physician assistant, or podiatrist.

By law (1) nonmedical staff can give emergency glucagon injections to diabetic students requiring prompt treatment to avoid serious harm or death and (2) a specifically designated paraprofessional can administer an epipen to a student with a known allergy. In both scenarios, nonmedical staff can administer injections if there is written authorization from the student’s parents and a written order from a physician. The act applies the same conditions and training requirements to employees administering epinephrine as already exist for glucagon, except the new provisions do not require that the employee volunteer to become an epipen administrator.

Nonmedical staff can administer the injections only if the:

1. school nurse is absent or unavailable;
2. employee has completed annual training in how to administer epinephrine that the school nurse and school medical advisor require; and
3. nurse and medical advisor attest, in writing, that the employee has completed the training.

The school nurse must provide general supervision to the qualified employee.

Maintaining Store of Emergency Epinephrine

The act requires the school nurse or, in the nurse’s absence a qualified school employee, to maintain a store of epinephrine cartridge injectors for emergency use. The act defines cartridge injector as an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

REQUIREMENTS FOR LOCAL AND REGIONAL BOARDS OF EDUCATION

The act requires local and regional boards of education to adopt policies and procedures allowing emergency administration of epinephrine as the law already allows for glucagon. The policies and procedures must (1) conform with the act’s provisions and State Board of Education (SBE) regulations and (2) be approved by the local board’s medical advisor, or if there is none, a qualified licensed physician.

Each school that administers medication under the act must record the administration as required by state law and store the medication as prescribed by Department of Consumer Protection regulations.

SBE REGULATIONS

The act requires SBE, in consultation with DPH, to adopt regulations that specify the conditions and procedures for the storage and administration of epinephrine for emergency first aid for students having allergic reactions who do not have a prior written parental authorization or a prior written order from a

qualified medical professional for epinephrine administration.

IMMUNITY FROM LIABILITY

The act extends to the epinephrine provisions the existing immunity from liability for employees and local boards provided under the prior-authorization glucagon and epipen laws.

It bars anyone from making a claim against a town, board of education, or school employee for damages resulting from administration of medication under the act. The immunity covers the qualified school personnel, but it does not apply to acts or omissions that constitute gross, wilful, or wanton negligence.

The act also extends immunity to those acting under an existing statute that allows intramural or interscholastic athletic coaches to administer medicinal preparations, including controlled drugs the consumer protection commissioner designates, to a student participating in athletics pursuant to a written medical order.

REQUIRED TRAINING

By December 31, 2014, the act requires SDE and DPH to jointly develop, in consultation with the School Nurse Advisory Council, an annual training program for emergency first aid to students who experience allergic reactions.

The program must include instruction in:

1. cardiopulmonary resuscitation (CPR),
2. first aid,
3. food allergies,
4. signs and symptoms of anaphylaxis (hypersensitivity due to a previous exposure to some type of agent or antigen),
5. prevention and risk-reduction strategies regarding allergic reactions,
6. emergency management and administration of epinephrine,
7. follow-up and reporting procedures after a student has experienced an allergic reaction,
8. carrying out the act's provisions, and
9. any other relevant issues related to emergency first aid for students with allergic reactions.

SDE must make the training program available to local and regional boards of education.

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